

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	SW	7533	
OPIE CLASSIFIER	S		5/11/99
FORMALITY REVIEW		71531	517.99 6.17.99

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7/10/93
2	✓	✓	7/12/93
3	✓	✓	7/18/93
4	✓	✓	7/18/93
5	✓	✓	7/18/93
6	✓	✓	7/18/93
7	✓	✓	7/18/93
8	✓	✓	7/18/93
9	✓	✓	7/18/93
10	✓	✓	7/18/93
11	✓	✓	7/18/93
12	✓	✓	7/18/93
13	✓	✓	7/18/93
14	✓	✓	7/18/93
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42	✓	✓	7/18/93
43	✓	✓	7/18/93
44	✓	✓	
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

BEST AVAILABLE